

Registration Form

International Conference on Nuclear Data for Science and Technology
Eldorado Hotel, Santa Fe, New Mexico, USA
September 26 - October 1, 2004

PLEASE TYPE OR PRINT LEGIBLY

Name: _____
Last First Middle

Organization: _____

Organization

Mailing

Address: _____

Street

City

State

Zip Code

Country

Phone Number

Fax Number

Email Address

Conference Costs: (includes general conference expenses and continental breakfasts)

Early registration fee:	\$ 400	If Paid by:	July 31, 2004
Registration fee:	\$ 450	If Paid by:	September 15, 2004
On-site registration fee:	\$ 500	If Paid after:	September 15, 2004
Student registration fee:	\$ 150		
One-day registration	\$ 100 (no proceedings or banquet)	Specify day	_____

Subtotal: \$ _____

Events:

Reception on Monday, September 27	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Concert on Tuesday, September 28	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Banquet on Thursday, September 30	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Unallowable Conference Costs: **separate non-federal check is required:**

Guest Concert	_____ Yes	_____ No	\$ 0
Guest Reception (s):	_____ Yes	_____ No	\$20 each
Guest Banquet (s)	_____ Yes	_____ No	\$50 each
Guest breakfast(s): (specify dates)	_____ Yes	_____ No	\$15 each

Total: \$ _____

Special Dietary Requirements: _____

Make check payable in US Dollars to: University of California/International Conference on Nuclear Data (U9DV)

Credit Cards will be accepted (**Visa or MasterCard Only**)

Your credit card will be processed one-two weeks prior to the conference. You will receive a receipt at the conference registration desk. Note: please do not supply credit card information by e-mail; instead FAX or send credit card information by regular mail.

VISA/MasterCard	Number	Expiration Date (mm/yyyy)	Name on Card	Personal /Corporate Card
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LANL Participants:

Please provide the following cost code information (**Do not** request a Travel check to be cut for this fee):

Cost Center	Program Code	Cost Account	Work Package
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Send Registration Form to:

Ms. Kay Grady

Group T-16

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